









Medical Examiner Service

Has the statutory duty to determine cause and manner of death

Statistical Summary

- Harris County (HC) is the third most populous county in the nation, exceeded only by Los Angeles and Cook counties
 - 4.5+ million¹ estimated HC population in 2015
 - 27,702 HC death certificates filed in 2015²
 - 41% (11,248) of HC deaths reported to HCIFS in 2015
 - 4,644 medicolegal (ML) cases received by HCIFS for examination
 - 234 trauma inquest cases reported
 - 6,370 inquest only cases reported
- 4,935 deaths were certified in 2015, including:
 - 4,644 Harris County medicolegal cases (all brought to HCIFS for examination)
 - 234 trauma inquests
 - 57 out-of-county cases



² Provisional Death Certificate data from the Texas Department of State Health Services

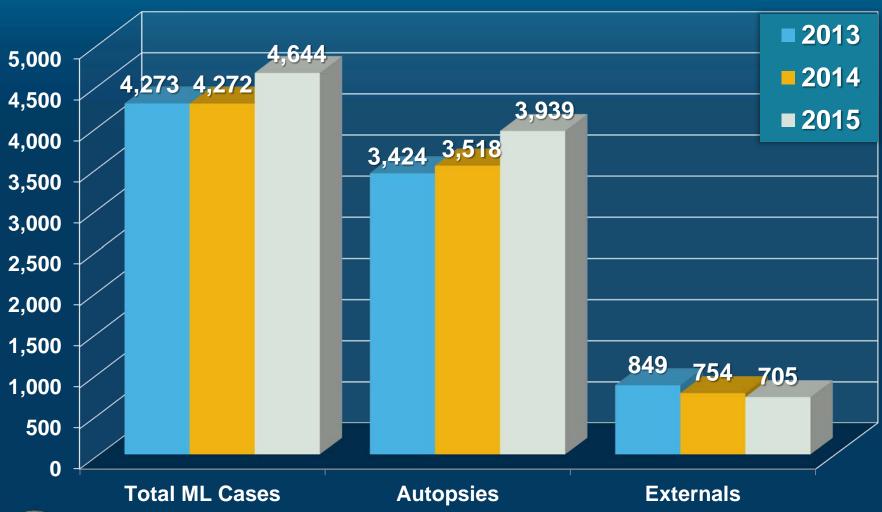


Statistical Summary

- 85% of ML cases (3,939) received a full autopsy*
 - 15% of ML cases (705) received an external examination only
- 226 decedents unidentified on arrival
 - 6 decedents remained unidentified at the end of 2015
- 239 referrals to Harris County Bereavement Services
- 11 anthropological exhumations performed
 (Exhumation of cold cases under the NIJ Grant Using DNA to Identify the Missing)
- No hospital autopsies retained



Total Caseload 2013-2015





Monthly ML Caseload 2015







Average Daily Medicolegal Caseload

2015: 12.7 cases

2014: 11.7 cases

Months with Highest Average Daily Caseload:

2015

July: 13.7 cases

January: 13.6 cases

2014

December: 12.4 cases

August: 11.5 cases

Organ & Tissue Donation Summary

- HCIFS maintains agreements with:
 - LifeGift
 - Lions Eye Bank of Texas at Baylor College of Medicine
 - Biograft Transplant Services, Inc.





Forensic Anthropology

Staffed by four doctoral-level forensic anthropologists

 3 are Diplomates of the American Board of Forensic Anthropology

2015 case work:

- 72 autopsy consultations (no report)
- 252 bone/cartilage trauma or pathology reports
- 26 skeletal cases examined
- 32 death scenes attended for skeletal recovery
- 36 cases of remains examined and determined to be either non-human or non-forensic





Forensic Entomology

Staffed by a board-certified Forensic Entomologist

 All reports are peer-reviewed by an independent board-certified Forensic Entomologist

2015 Casework:

- 61 Cases
- 40 Scene Collections
- 18 Autopsy Collections
- 2 Scene & Autopsy Collections

Manners of Death:

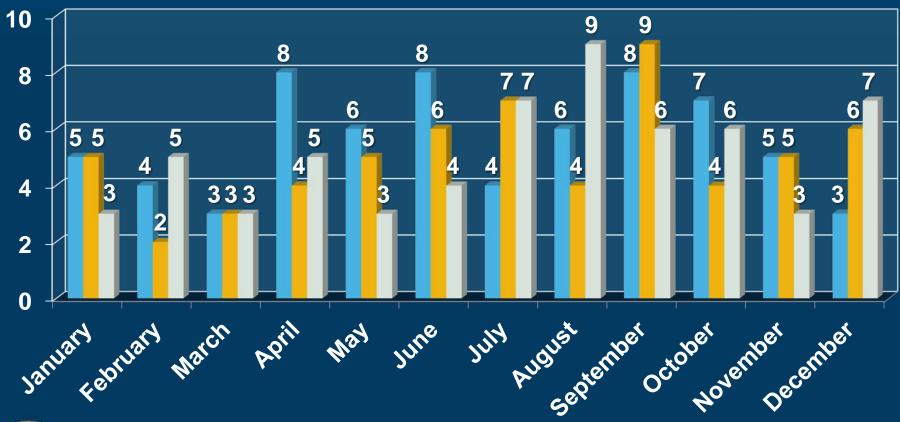
30 Natural

- 7 Suicides
- 12 Undetermined
- 5 Homicides

7 Accidents

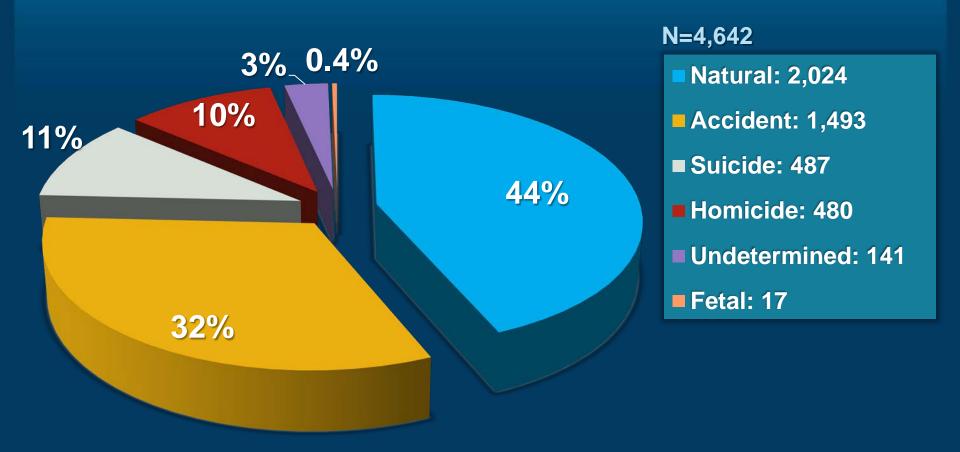
ML Cases with Entomology Reports 2013-2015







Manner of Death Autopsy and External Exams





Manner of Death Filtered by Autopsy and External Exams



Natural: 1,683

Accident: 1,139

■ Suicide: 483

■ Fetal: 15

■ Undetermined: 138 ■ Homicide: 480

N=705 External Exams

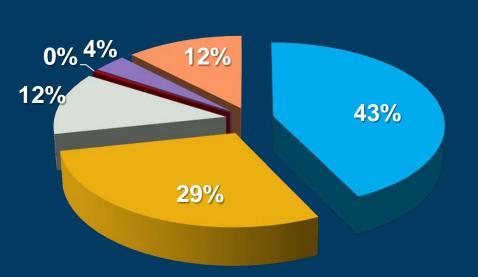
Natural: 341

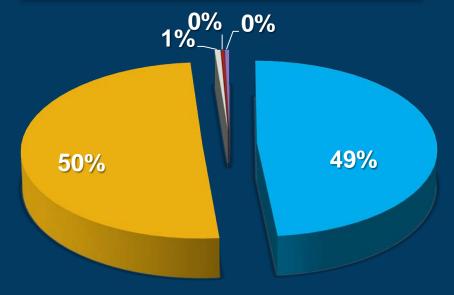
Accident: 354

■ Suicide: 4

Fetal: 2

Undetermined: 3

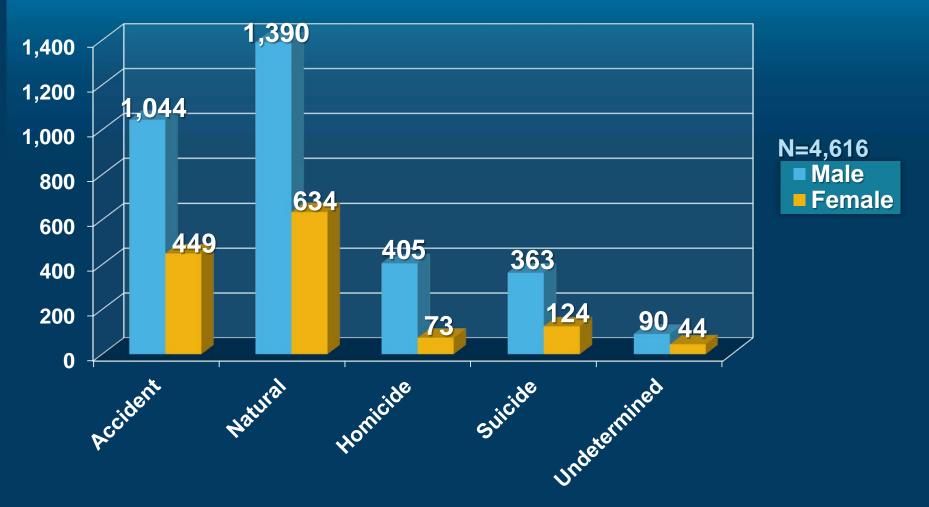








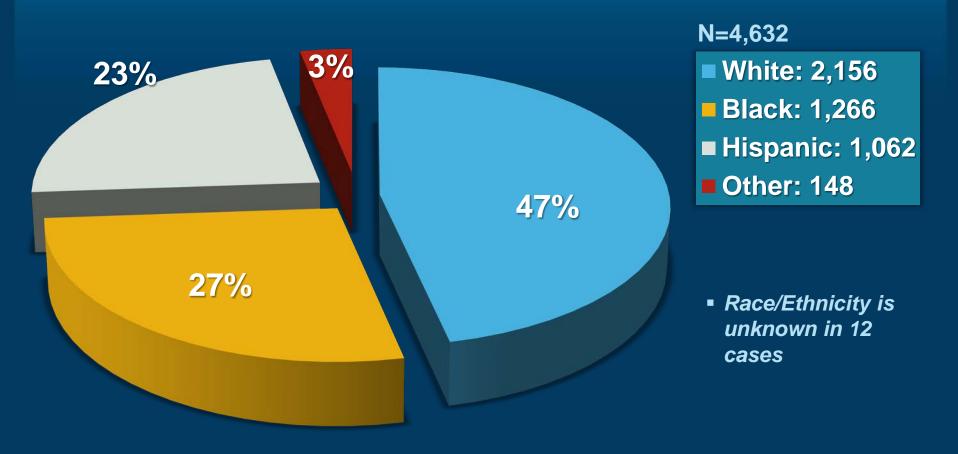
Manner of Death Stratified by Sex



- Does not include Fetal Manner of Death for 17 cases
- Sex is unknown for 11 cases

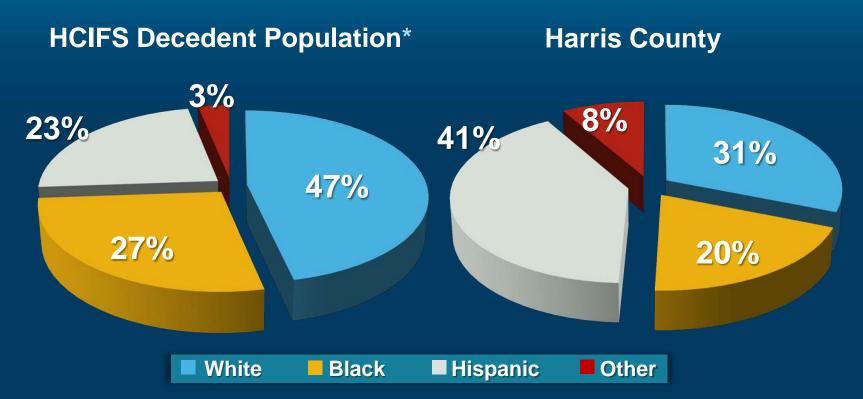


Race/Ethnicity Components of ML Cases





Demographic Data on Race/Ethnicity HCIFS Compared to Harris County Population

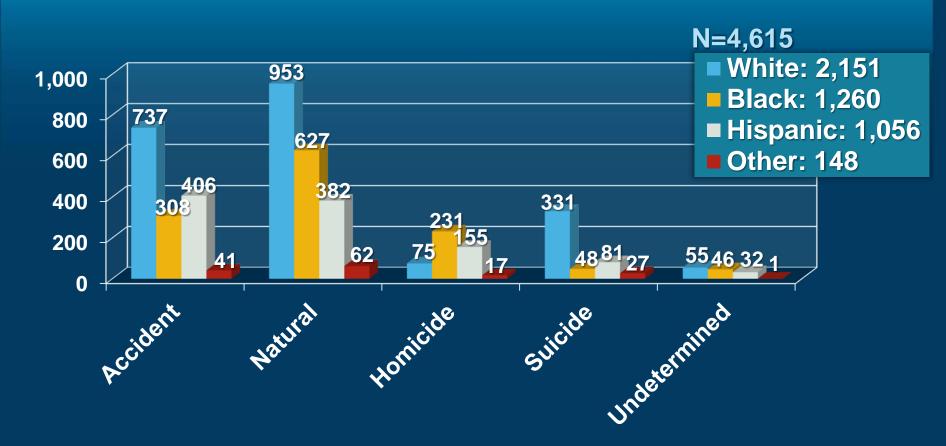


- Based on Harris County demographics, White and Black individuals are over-represented in the HCIFS caseload
- HCIFS decedent population, N=4,632, excludes unknown race/ethnicity*
- Harris County population, N=4,538,028, estimated

2015 population data are provided by the United States Census Bureau



ML Cases by Manner and Race/Ethnicity



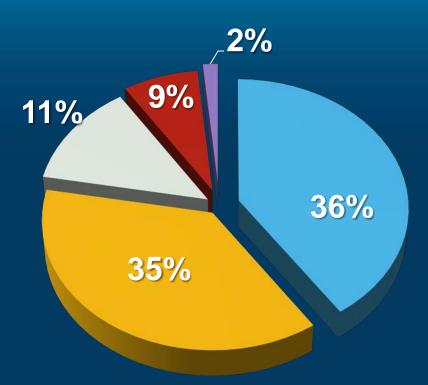
- Based on Harris County demographics, Black individuals are over-represented in homicide deaths
- Does not include Fetal Manner of Death for 17 cases
- Excludes 12 individuals of unknown race/ethnicity



Infant/Fetal Deaths

- 131 infant/fetal death cases (aged less than 1 year)
- 53 cases of Undetermined Manner
 - 28 were classified as co-sleeping
- 23 of the Natural deaths, were SIDS cases

Approximately 78,000 live births were registered in Harris County in 2015

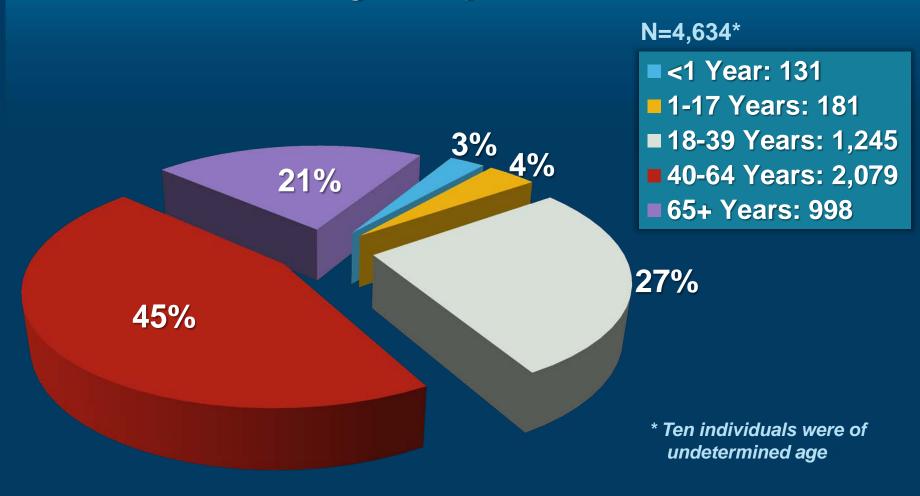


N=131

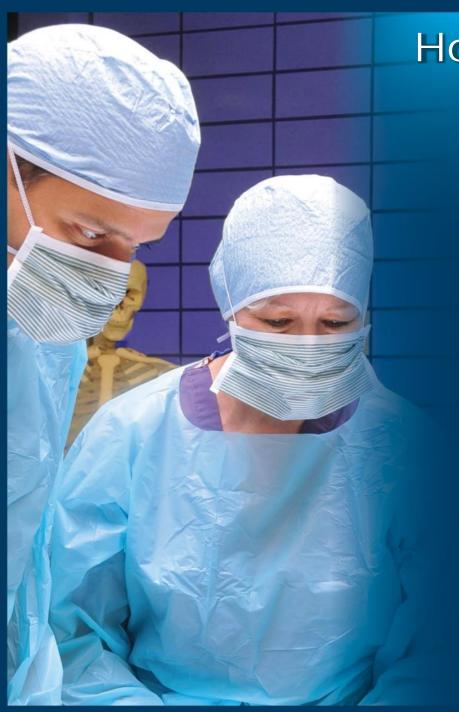
- Undetermined: 53
- Natural: 49
- Fetal Manner: 17
- Accident: 10
- Homicide: 2



Age Categories Represented by Proportion







Homicide Case Volume 2013 – 2015

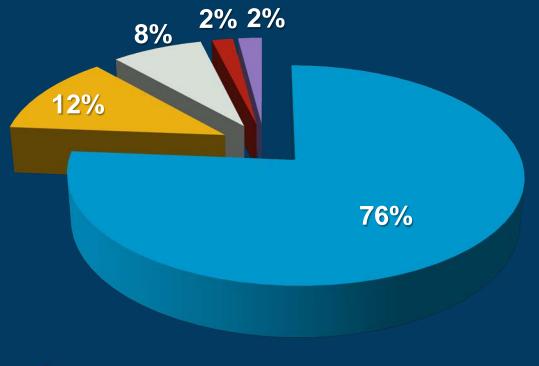
2013: 412 cases

2014: 387 cases

2015: 480 cases

Cause of Death in Homicide Cases

- 152 cases are linked to at least one other ML case
- 24% increase in homicide cases from 2014 to 2015
- 23 homicide cases are associated with domestic violence
- 17 homicide deaths occurred "while at work"



*N=480

Firearm: 376

Blunt Trauma: 60

■ Sharp Trauma: 38

Asphyxia/Strangulation: 9

■ Other: 10

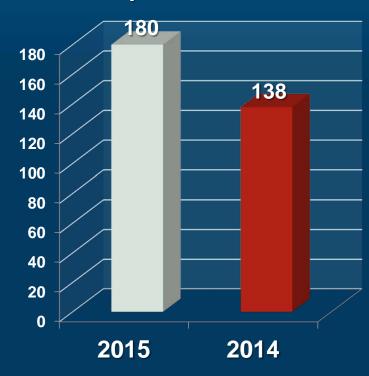
* There is overlap in blunt and sharp force trauma cases (N=9) and an overlap in blunt force trauma and strangulation cases (N=3)

Homicide Deaths

Firearm Homicide Increase from 2014 to 2015



Multiple Firearm Wounds

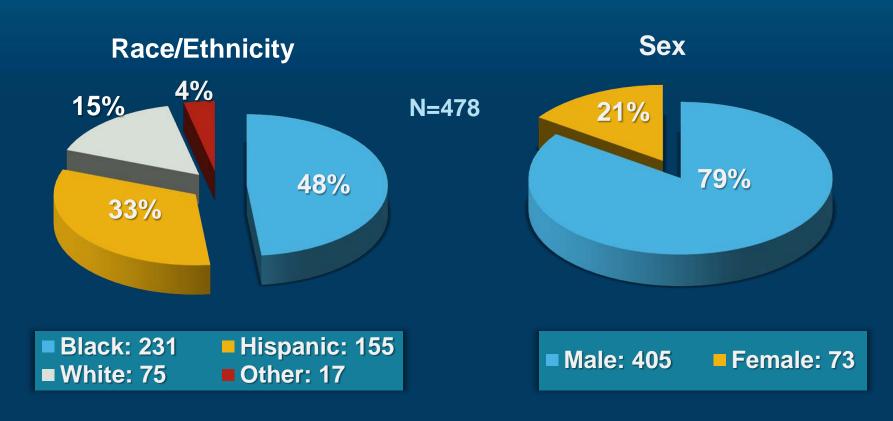


From 2014 to 2015:

- 35% increase in firearm homicides
- 30% increase in multiple firearm wound homicides



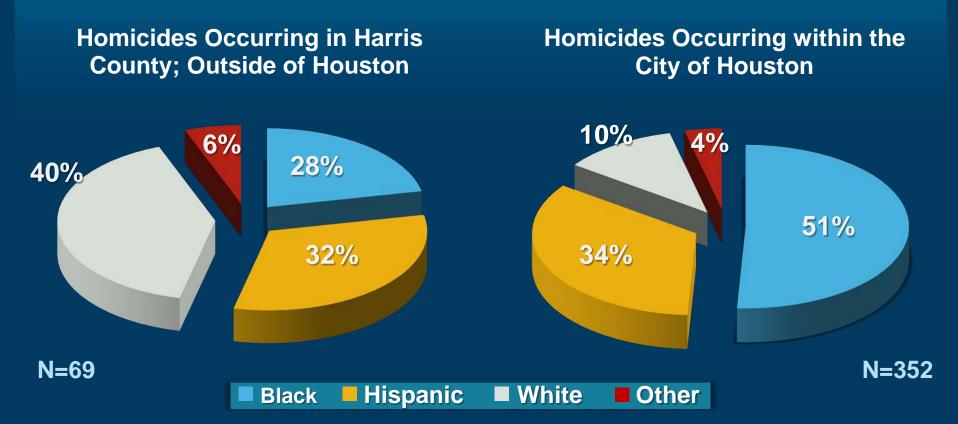
Homicide Deaths by Demographic Category



- Based on Harris County demographics, Black individuals and males are over-represented in homicide deaths
- Two individuals are of unknown sex, and race/ethnicity



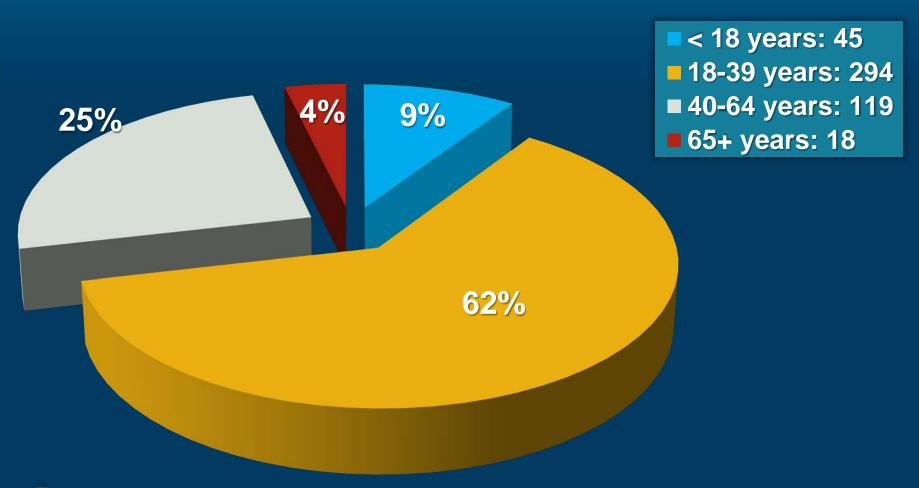
Homicide Deaths by Race/Ethnicity Harris County and the City of Houston



■ 352 homicide cases were attributed to injury locations within the City of Houston based on the address of the place of injury and law enforcement case jurisdiction

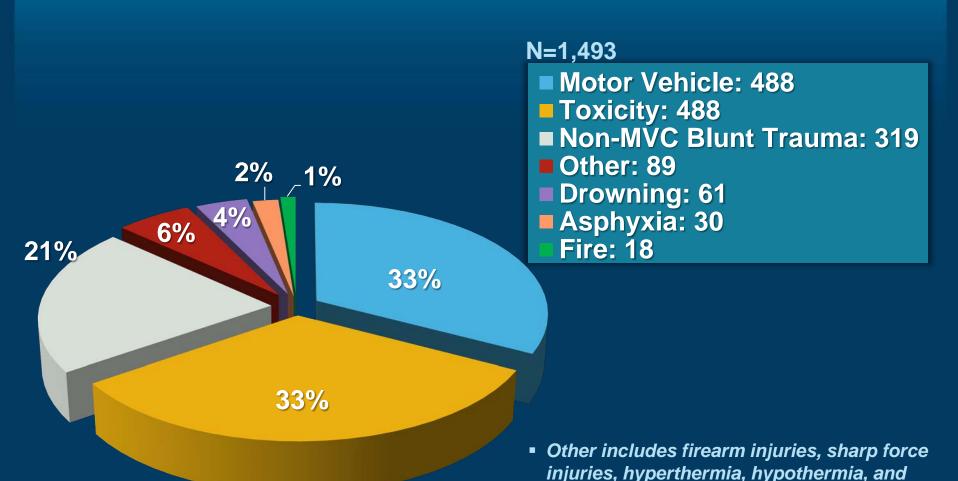


Homicide Deaths by Age Category





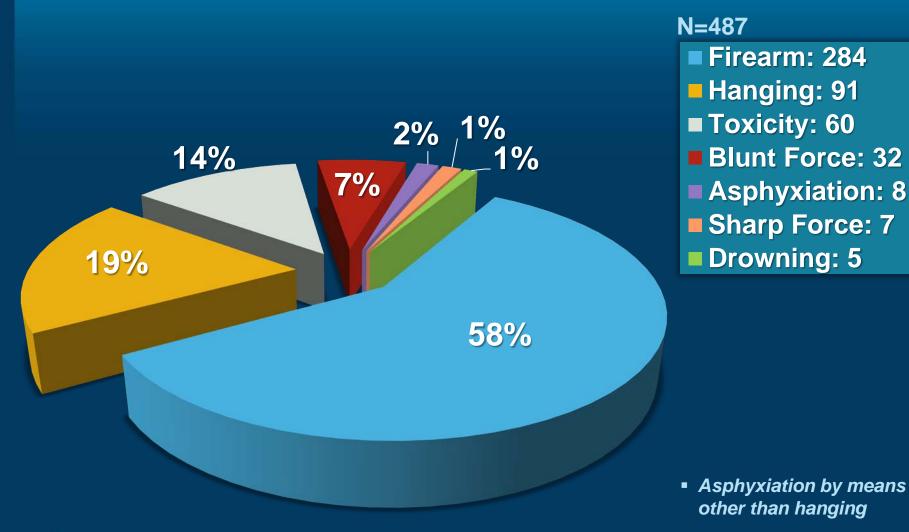
Most Common Causes of Accidental Death



medical misadventures



Causes of Death in Suicide Cases





Demographic Data for Suicide Cases

Male to female ratio is 3 to 1

Age range is 13 to 92 years

 The number of White suicide cases is more than twice the number of cases for all other races/ ethnicities combined (331 compared to 156)

Number of companion Suicide/Homicide cases:

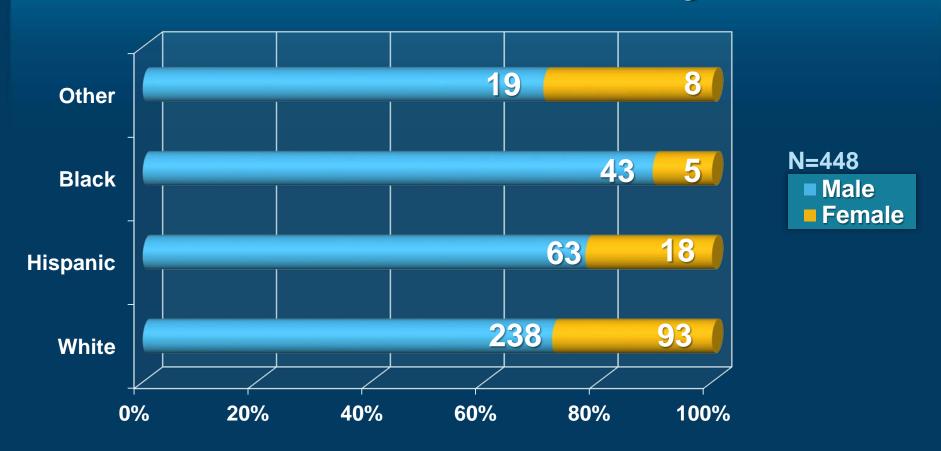
2013: 5

2014: 5

2015: 15



Suicide Cases Stratified by Sex & Race/Ethnicity

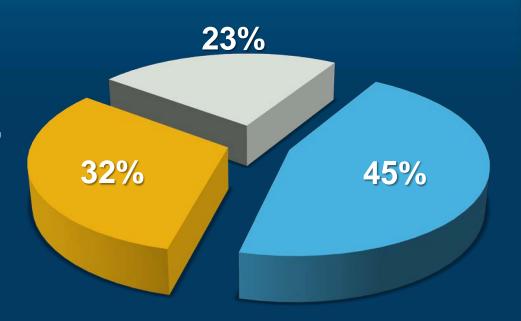


 Based on Harris County demographics, White males are over-represented in cases of suicide



Motor Vehicle Crash (MVC) Death Cases

- MVC fatalities include 19 children ranging in age from 7 days to 12 years
- 5 children were pedestrians,21 months to 6 years of age
- 24% of driver fatalities (56)
 were under 25 years of age
- From February 1 to the end of 2015, 22 stranded motorists were hit on the side of the road



N=488

- **Driver: 221**
- Passenger or Unknown Position: 154
- Pedestrian: 113

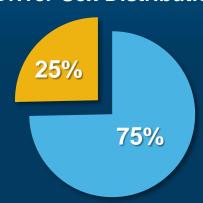


MVC Sex and Age Distributions

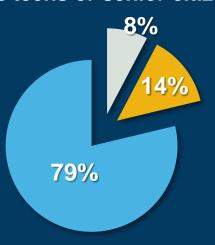
Driver Sex Distribution



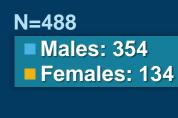
Sex Distribution all MVC



Proportion of drivers who were teens or senior citizens







N=221 Drivers

■ Male Drivers: 165

Female Drivers: 56

N=221 Drivers

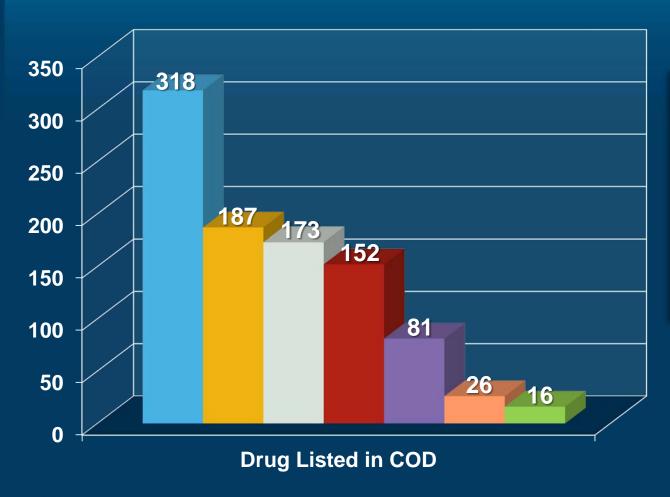
■ 16 to 19 years: 17

■65+ years: 30

Other Ages: 174



Common Drugs Listed in Cause of Death



N = 550

- Opioids
- Benzodiazepines
- Cocaine
- **■** Ethanol
- Amphetamine/Meth
- Carisoprodol
- Acetaminophen
- Drugs may be combined within a case
- These data do not reflect discrete cases



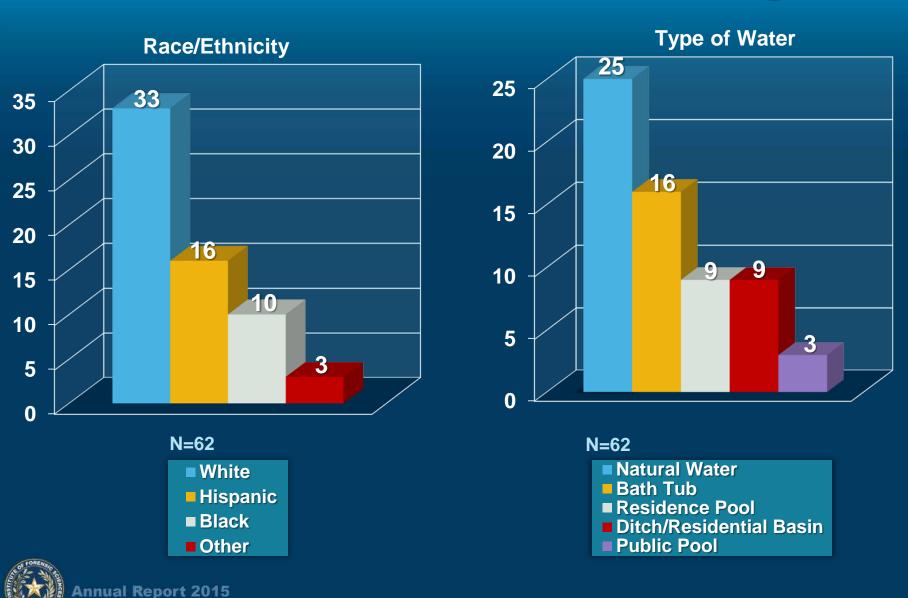
Cases of Accidental Drowning

62 total cases in 2015
 (Excluding cases of submerged vehicles)

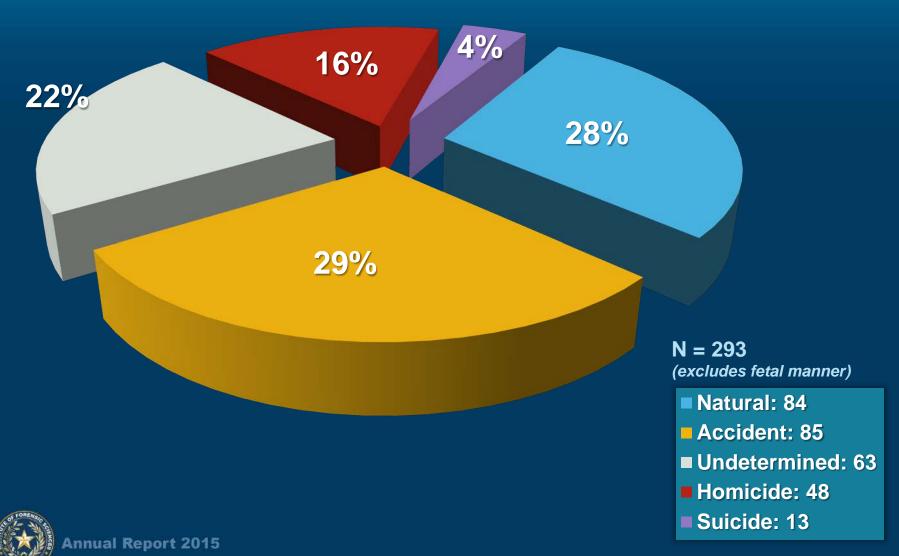
- Age range is 14 months to 91 years
 - Includes 10 young children aged 14 months to 9 years
- 48 of the drowning cases are males compared to
 14 female cases



Cases of Accidental Drowning



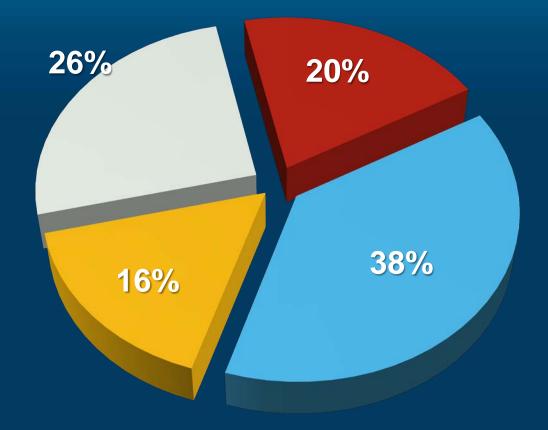
Manner of Death in Children (Aged 0-17 Years)



Toddler Deaths (Aged 1-4 Years)

Injury Deaths Include:

- 4 toddlers killed in MVC as passengers
- 4 toddlers drowned in accidents
- 14 Homicide cases
 - 8 male
 - 6 female



N=55 toddler death cases

■ Accident: 21

■ Homicide: 14

■ Natural: 9

■ Undetermined: 11

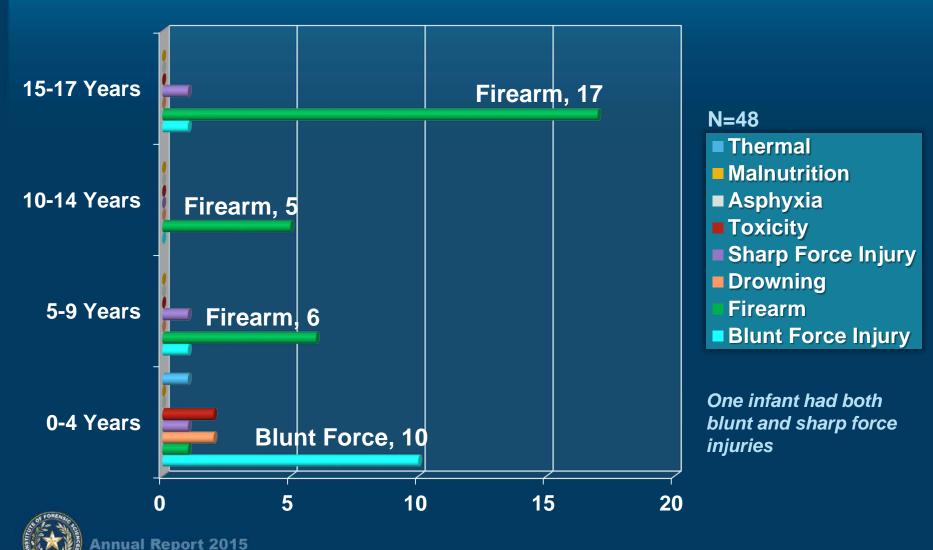


Top Five Injury Deaths of Children (Aged 0-17 Years)

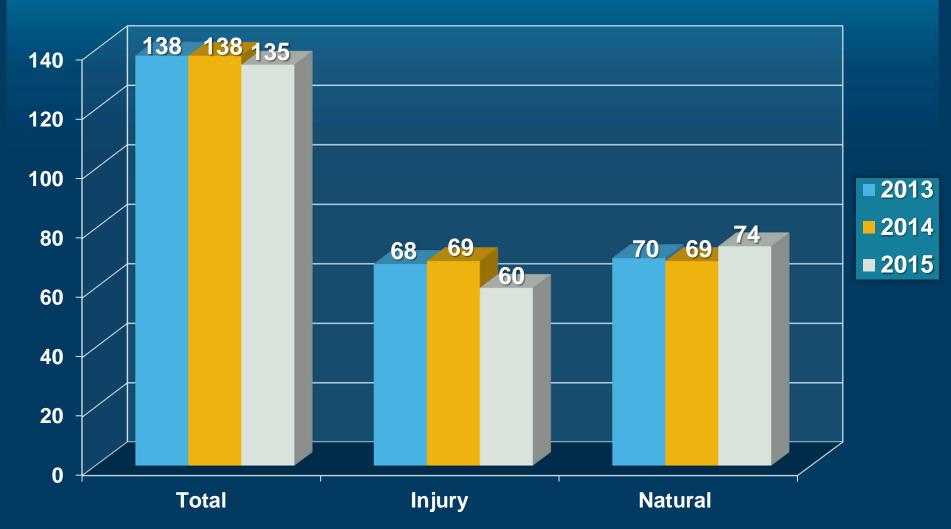
- 1. Motor vehicle crashes (40)
- 2. Firearm wounds (38)
- 3. Blunt force injury, not MVC (24)
- 4. Asphyxia/Hanging (15)
- Drowning (12)



Homicide Deaths of Children (Aged 0-17 Years)



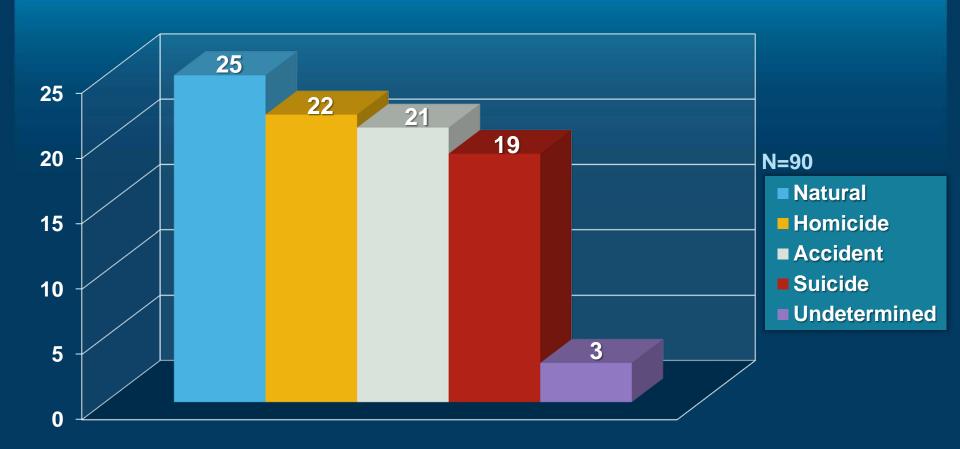
"While at Work" Deaths





One death in 2015 was Undetermined in manner

"In Custody" Deaths



HCIFS defines a death as "in custody" when a death occurs of any person who is under arrest or is in the process of being arrested, is en route to be incarcerated, or is incarcerated at a municipal or county jail, state prison, or other local or state correctional facility (including any juvenile facility)



Most Frequent Primary Causes of Natural Death

N=2,024 Natural Deaths

Hypertensive/Atherosclerotic Cardiovascular Disease 62% or 1,256 deaths in 2015

4% Embolus/Thromboembolus

4% Chronic Ethanolism

4% Other forms of cardiac death

3% Neoplasm

3% Diabetes Mellitus/Ketoacidosis

2% Seizure Disorders

2% Community-acquired Pneumonia

1% Gastrointestinal Disorders

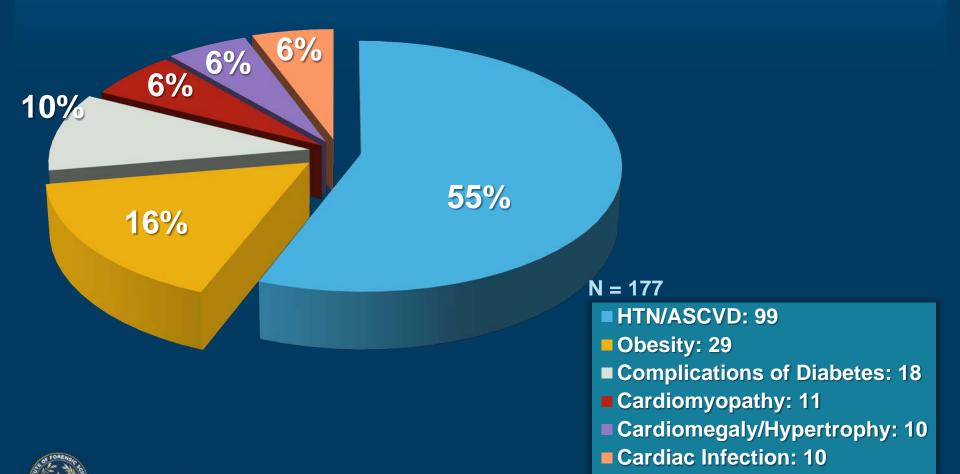
1% Hepatitis

Other causes of natural death (15%) include asthma, bacterial and viral infections (not pneumonia), congenital disorders and complications of HIV/AIDS



Cardiac Death in Young People

In 2015, 255 natural deaths of young people aged 16 to 40 years were investigated – The following disorders increasing the risk of cardiac death are listed in the primary cause of death



nnual Report 2015

Diabetes and Obesity

- For 289 decedents, diabetes mellitus was listed in the primary cause (79) or the contributing cause (299) of death
 - 65% were either overweight or obese
 (Body Mass Index, BMI = 25+)
- BMI was calculated for 4,099 decedents aged 13 years or older, at least 60" tall and weighed at least 100 pounds:
 - 1,413 (34%) were obese with a BMI of 30 or greater
 - 1,278 (31%) were overweight with a
 BMI between 25 and 29
 - The greatest BMI was 92 (607 lbs./68" tall)
 - 24 decedents weighed more than 400 lbs.
 - 1,408 (34%) of decedents were of normal weight or underweight





Quality Management Division

A separate division of HCIFS

Ensures that services provided by the Institute are reliable and of high quality

Responsibilities

Maintaining a documented quality management system that meets or exceeds all accreditation and county requirements

Facilitating quality improvements within each division of HCIFS

Monitoring the continued use of best practices and ensuring the reliability of records released for discovery





Accomplishments in 2015

686
standard operating procedures reviewed

139 proficiency tests administered

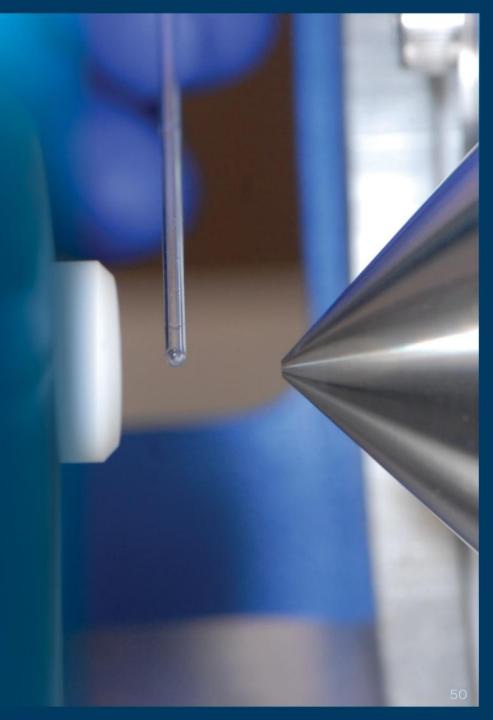
407 court orders processed

10 internal audits conducted

51 internal training sessions provided

Crime Laboratory Service

Provides analytical testing services to the HCIFS Medical Examiner Service, the justice system and law enforcement agencies in Harris and surrounding counties





Crime Laboratory Service Statistical Summary

- Cases received: 25,471
 (Approximately a 10% increase from 2014)
- Cases completed: 21,027
- Total Number of submitting agencies: 80
- 40% of laboratory personnel have a professional certification
 - 9 analysts certified by the American Board of Forensic Toxicology
 - 33 analysts certified by the American Board of Criminalistics

Crime Laboratory Service:

Drug Chemistry Laboratory





Drug Chemistry Laboratory

In accordance with Texas state statutes, identifies confiscated, illegal and dangerous drugs, including:

- Plant material
- Powders, tablets, liquids
- Drug paraphernalia

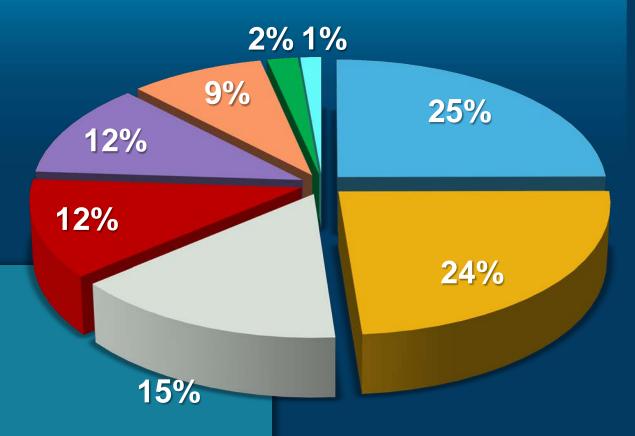
The laboratory also develops methods to identify new "designer" drugs including:

- Stimulants known as "Bath Salts"
- Synthetic cannabinoids such as "Spice" or "K2"
- NBOMe hallucinogens

Cases Received & Completed



Test Results - 2015



N=15,487

■ Other: 3,861^{*}

■ Marihuana: 3,696

■ Methamphetamine: 2,331

■ Cocaine: 1,890

■ Prescription Drugs: 1,821

■ Designer Drugs: 1,362

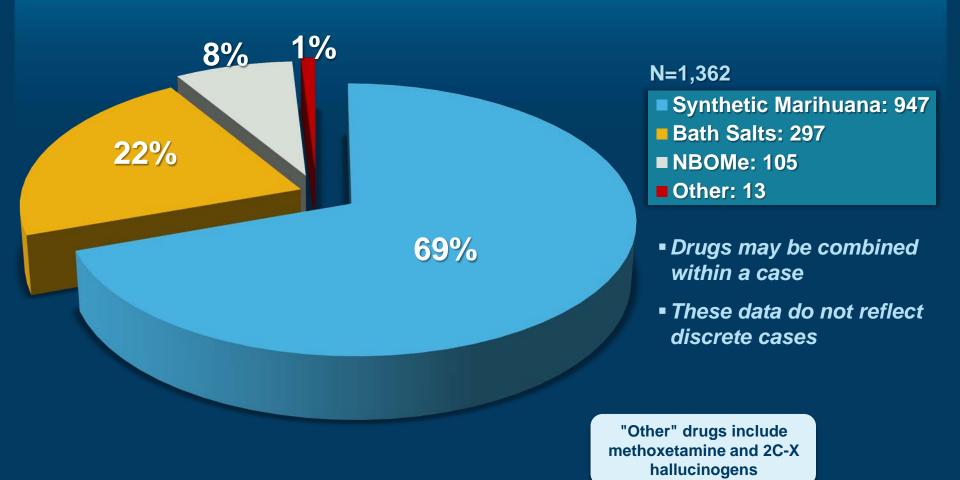
No Compounds Detected, Identified, Confirmed: 313

■ Heroin: 213

* "Other" includes a variety of controlled and non- controlled substances such as drug cutting agents



Breakdown of Designer Drugs Test Results – 2015





Designer Drug Trends



- Bath Salts (Synthetic Cathinones)
- K2/Spice (Synthetic Cannabinoids)
- NBOMe Hallucinogens
- Drugs may be combined within a case
- These data do not reflect discrete cases





Crime Laboratory Service:

Forensic Genetics Laboratory

Forensic Genetics Laboratory

Conducts DNA testing primarily for:

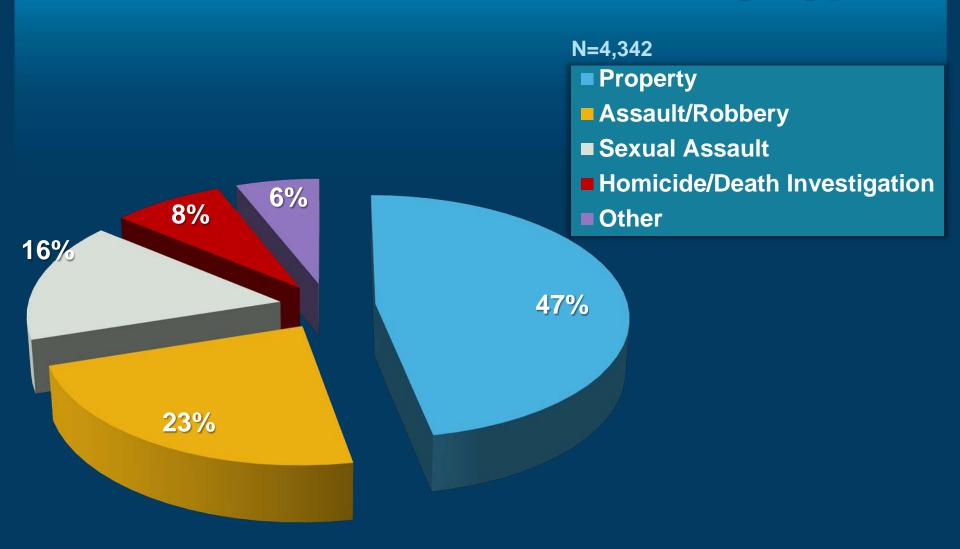
- Law enforcement agencies
- HCIFS medical examiners
- HCIFS forensic anthropologists to assist in positively identifying decedents

Cases submitted for DNA testing include crimes against persons such as sexual assault, homicide and robbery, as well as property crimes such as burglary and theft

Crimes against persons are given first priority for testing

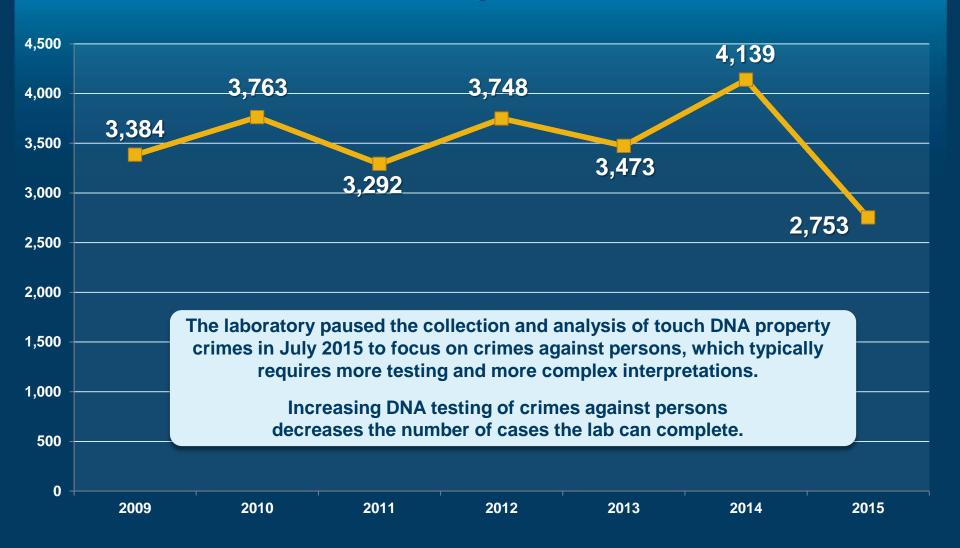


Case Submissions Stratified by Type



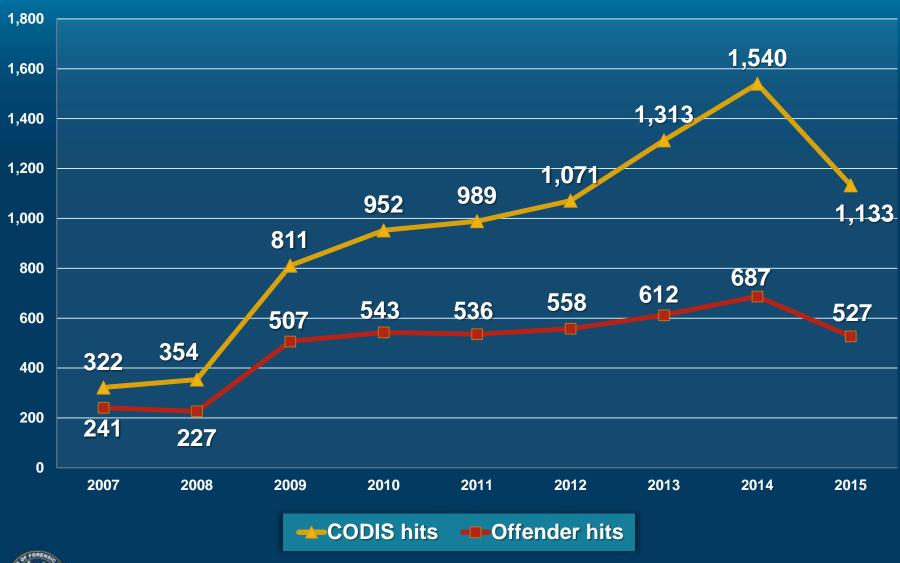


Cases Completed 2015





CODIS Hits 2015







Trace Evidence DNA Collection Team

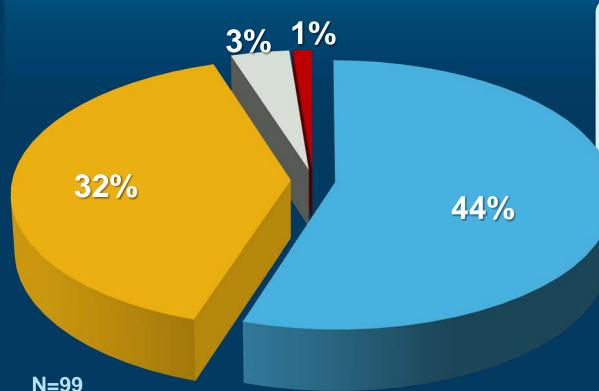
Specialized DNA analysts who attend select death scenes to collect DNA and trace evidence from bodies that have been:

- Dumped
- Bound
- Thought to have been in close contact with the perpetrator

The team has had a number of successes obtaining DNA different from that of the victim

This information can assist investigators in solving crimes

Trace DNA Collection Homicide Cases by Cause of Death



- 80% of the Trace DNA Collection Cases are Homicides
- Of those, almost half are cases of Gunshot Wounds

11-33

- **Gunshot Wound**
- Strangulation/Asphyxia

- **■** Blunt- or Sharp-Force Trauma
- **■** Homicide/Undetermined Cause of Death





Forensic Toxicology Laboratory

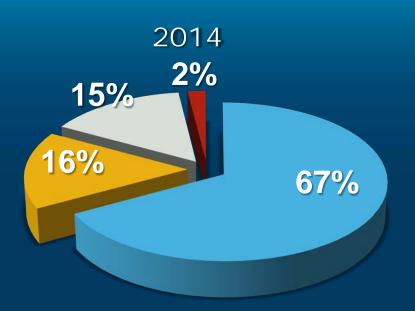
Analyzes biological evidence submitted by the HCIFS Medical Examiner Service and law enforcement agencies in Harris County for:

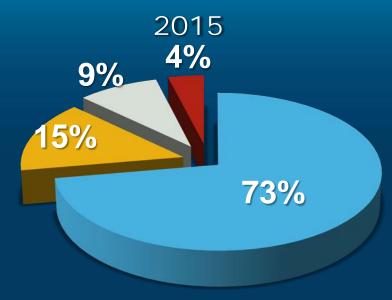
- Death investigations
- Driving while impaired (DWI) cases
- Drug-facilitated sexual assaults
- Other criminal investigations

The only forensic toxicology laboratory in Texas dually accredited by the American Society of Crime Laboratory Directors/Laboratory Accreditation Board and the American Board of Forensic Toxicology



DWI Trends - Case Result Distribution





N=2,223

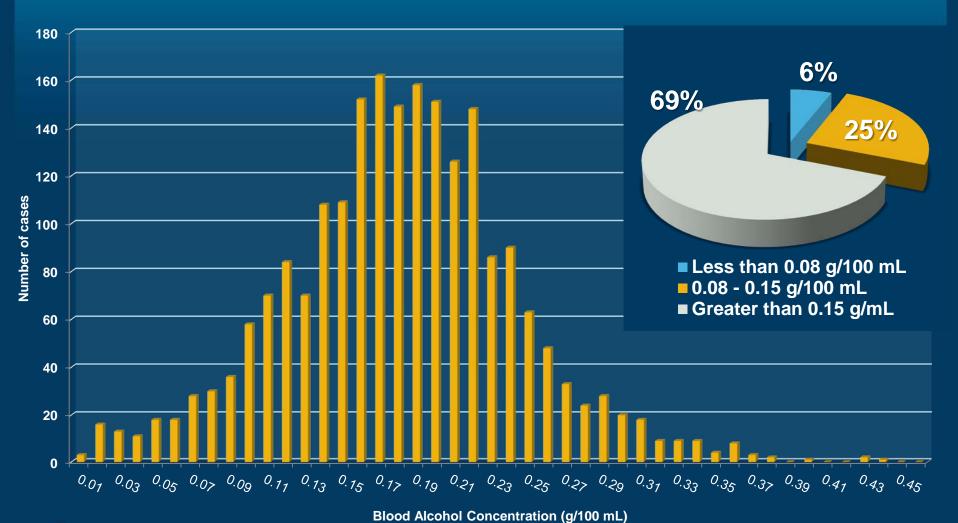
- Alcohol-Positive Only: 1,480
- Alcohol- & Drug-Positive: 348
- Drug-Positive Only: 344
- Alcohol- & Drug-Negative: 51

N = 124

- Alcohol-Positive Only: 1,925
- **■** Drug-Positive Only: 394
- Alcohol- & Drug-Positive: 227
- Alcohol- & Drug-Negative: 95
- Prior to June 2015, cases with alcohol of less than 0.17 g/100 mL received drug testing
- Beginning June 2015, cases with alcohol of less than 0.10 g/100 mL received drug testing

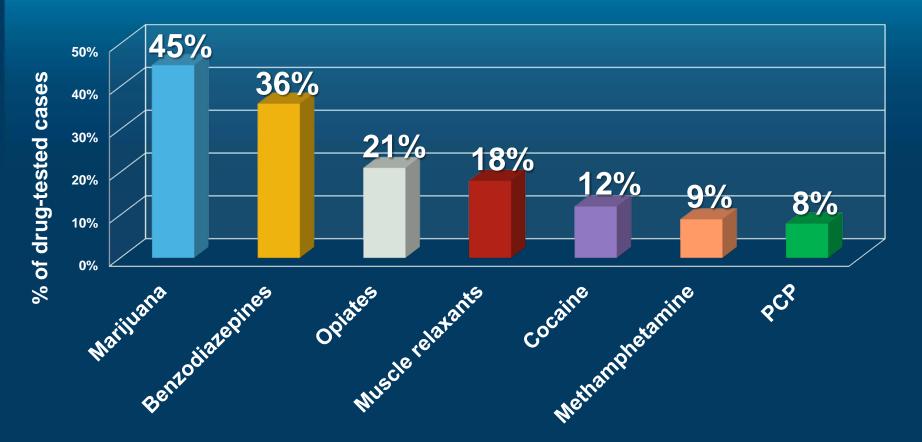


DWI Blood Alcohol Concentrations



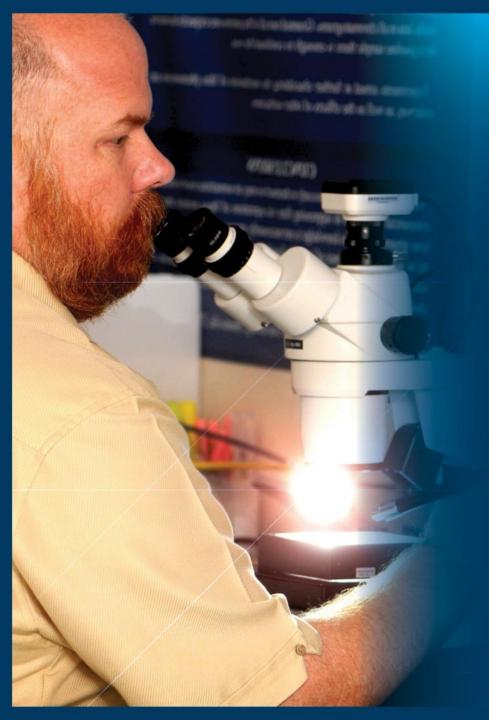


Drug Prevalence in Drug-Tested DWI Cases



- True prevalence may be underrepresented as one case could have multiple drugs from a single drug class, e.g. opiates or benzodiazepines
- Other identified drug classes include: barbiturates, anti-seizure medicines, over-the-counter cough and cold medicines, huffing agents, bath salts, synthetic cannabinoids and anti-depressants





Crime Laboratory Service:

Physical Evidence

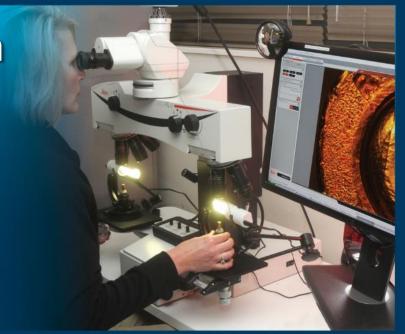
- FirearmsIdentification Laboratory
- Trace Evidence Laboratory

Firearms Identification Laboratory

Conducts examinations of evidence related to investigations of gun-related offenses

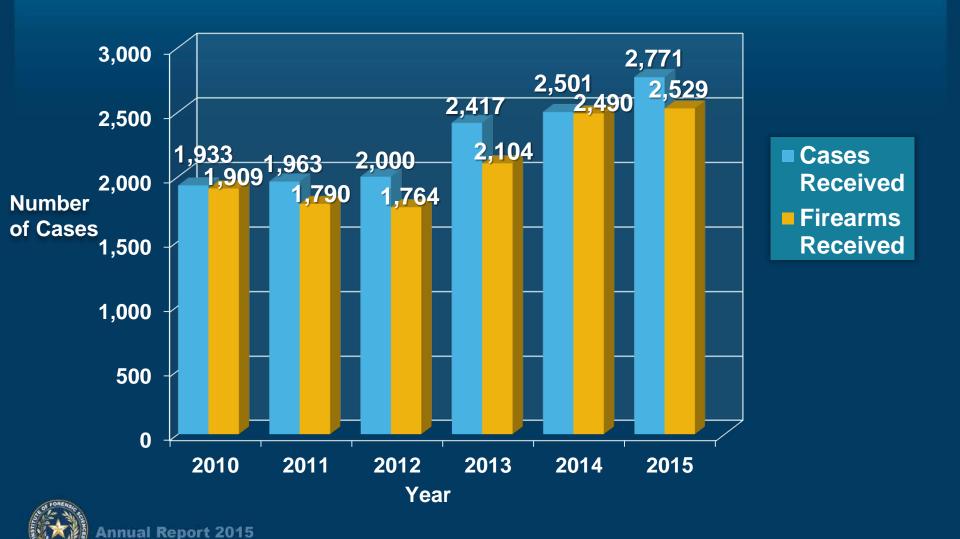
Examinations are conducted on the weapons, bullets and cartridge casings

Serves as a regional facility for the transmission of data into the National Integrated Ballistics Information Network database

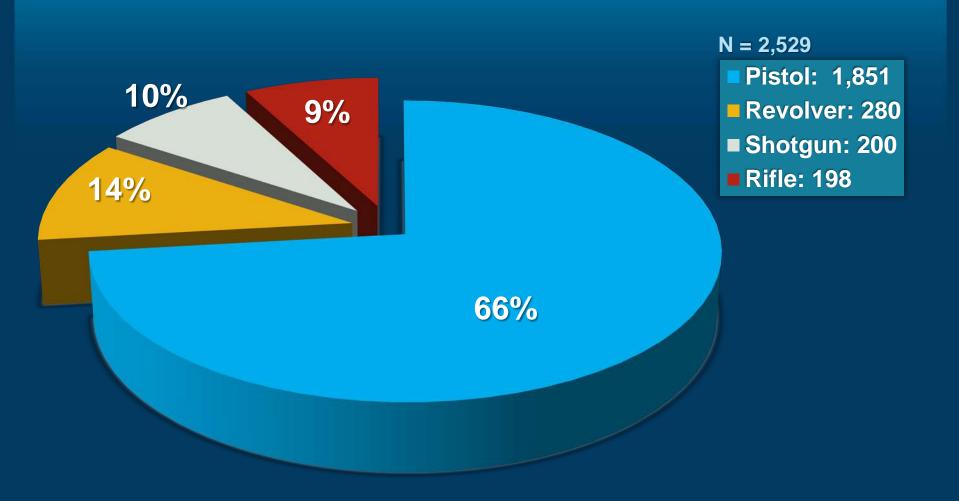




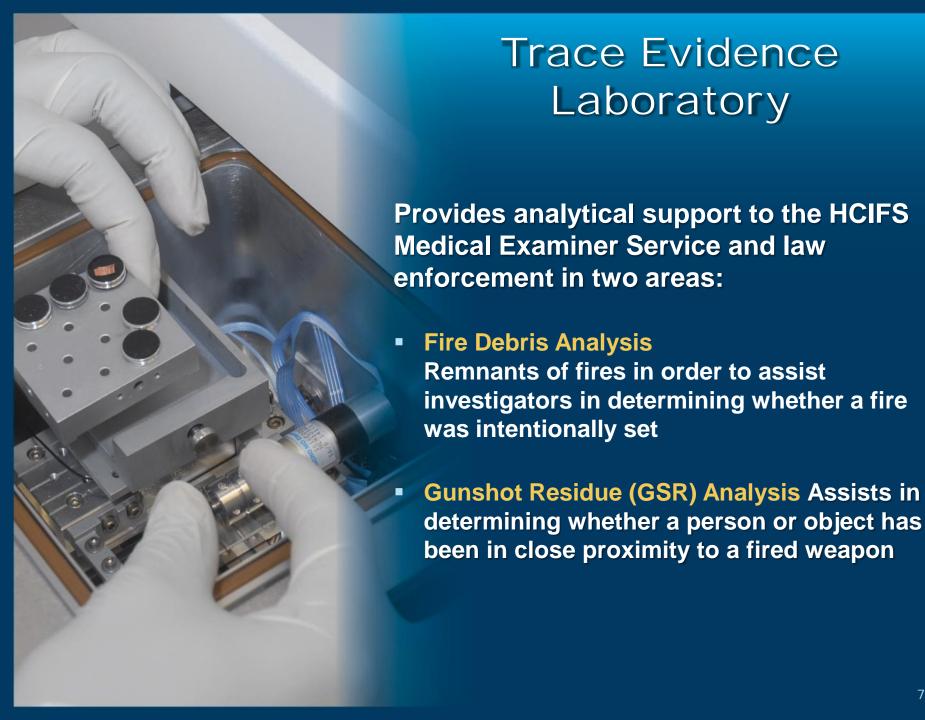
Firearms Identification Casework



Firearms Received by Type







Trace Evidence Casework



Published Scientific Work

18 published works in peer-reviewed journals



Publications by HCIFS Scientists

	Author/s	Title	Publication
1	Bird CE, Fleischman JM	A Rare Case of an Intact Bone Plug Associated with a Gunshot Exit Wound	Journal of Forensic Sciences. 2015;60(4):1074-1077. doi:10.1.1111/1556- 4029.12756
2	Crowder C	Review of Biological Affinity in Forensic Identification of Human Skeletal Remains	Journal of Forensic Sciences 60(6):1671-72
3	Derrick SM , Raxter MH, Hipp JA, Goel P, Chan EF, Love JC, Wiersema JM , Akella NS	Development of a Computer-Assisted Forensic Radiographic Identification Method Using the Lateral Cervical and Lumbar Spine	Journal of Forensic Sciences. 2015;60(1):5- 12
	Drake SA , Cron SG, Giardino A, Trevino V , Nolte KB	Comparative Analysis of the Public Health Role of Two Types of Death Investigation Systems in Texas: Application of Essential Services	Journal of Forensic Sciences. 2015;60(4);914-91 doi:10.1111/1556- 4029.12748
5	Drake SA, Hendrix C, Garza R., Godwin, K	Stranded Motorist Deaths in Harris County, Texas: A Deadly Game of Highway Roulette	Journal of Forensic Nursing. 2015. doi: 10.1097/JFN.0000000000000078
6	Drake SA , Adams N	Forensic Nursing Science Simulation Scenarios: Design and Implementation Strategies	Clinical Simulation in Nursing 2015;11(3), 194-198 doi: 10.1016/j.ecns.2014.11.004
7	Drake SA, Langford R, Young E, Ayers CJ	Forensic Nursing Science Knowledge and Competency: The Use of Simulation	Crit Care Nurs Q 2015;38(1), p.81-88. doi: 10.1097/CNQ.00000000000000045
8	Hanzlick RL, Goodin J , Haden-Pinneri, KH	Mind Your Manners: 20 Years Later	Academic Forensic Pathology. 2015; 5(3):380-395.
9	Love JC, Derrick SM, Wiersema JM , Peters C	Microscopic Saw Mark Analysis: An Empirical Approach	Journal of Forensic Sciences. 2015; 60(S1):S21-S26
10	Peterson JE, Love JC, Pinto DC, Wolf DA, Sandberg G	A Novel Method for Removing a Spinal Cord with Attached Cervical Ganglia from a Pediatric Decedent	Journal of Forensic Sciences (Epub). 2015;1- 4. doi:10.1111/1556-4029.12925



Publications by HCIFS Scientists

	Author/s	Title	Publication
11	Pinto DC, Love JC, Derrick SM, Wiersema JM, Donaruma-Kwoh M, Greeley CS	A Proposed Scheme for Classifying Pediatric Rib Dead Fractures Using Case Examples	Journal of Forensic Sciences. 2015;60(1):112-117
12	Pinto DC, Pace ED	A Silver-Stain Modification of Standard Histological Slide Preparation for Use in Anthropology Analyses	Journal of Forensic Sciences. 2015;60(2):391-398 doi:10.1111/1556-4029.12697
13	Sanford M	Forensic Entomology in the Medical Examiner's Office	Academic Forensic Pathology. 2015; 5(2):306-317
14	Sanford M	Forensic Entomology of decomposing humans and their decomposing pets	Forensic Science International. 2015; 247:e11-e17
15	Sanford MR, Tomberlin JK, VanLaerhoven SL	Behavioral Ecology and Forensic Entomology (Book Chapter)	International Dimensions and Frontiers of Forensic Entomology. (Tomberlin JK, Benbow ME (eds.)), Taylor & Francis, Boca Raton, FL. 2015, p. 331-336
16	Tomberlin JK, Sanford MR , Pimsler ML, VanLaerhoven SL	Vertebrate Carrion as a Model for Conducting Behavior Research (Book Chapter)	Carrion Ecology, Evolution and their Applications. (Benbow ME, Tomberlin JK, Tarone AM (eds.)), CRC Press, Boca Raton, FL. 2015, p. 213
17	Zychowski KE, Elmore SE, Rychlik KA, Ly HJ, Pierezan F, Isaiah A, Suchodolski JS, Hoffmann AR, Romoser AA, Phillips TD	Mitigation of Colitis with NovaSil Clay Therapy	Digestive Diseases and Sciences. 2015;60:382-392. doi:10.1007/s10620-014-3360-7
18	Dierksen, J, Gonsoulin, M, Walterscheid, JP	Poor Man's Methadone. A Case Report of Loperamide Toxicity	The American Journal of Forensic Medicine and Pathology. 2015; 36(4): 268-270



HCIFS Staff – Bold



Medical Examiner Fellowship Programs

Forensic Pathology Fellowship:

A 1-year fellowship that is a required training program for all new pathologists seeking Forensic Pathology Board certification

January – June 2015

2 fellows completed:182 autopsies and3 external examinations

July – December 2015

2 fellows completed:141 autopsies and6 external examinations





Medical Examiner Fellowship Programs

Forensic Anthropology Fellowship 1:

A 1-year grant-funded research project evaluating the relationship between cervical spine injury and blunt head trauma in a pediatric population

January – September 2015:

 1 fellow collected data from
 15 study subjects and modified the Infant Injury Database for data entry

Medical Examiner Fellowship Programs

Forensic Anthropology Fellowship 2:

A 1-year grant-funded research project continuing the investigation in pediatric bone health by validating qualitative ultrasound data using bone mineral density Measurements from four separate modalities

October 2015 – December 2015:

 1 fellow collected data from 8 study subjects and entered medical history and demographic data into the Infant Injury Database





Crime Laboratory Fellowship Programs

Forensic Toxicology:

A 2-year fellowship providing training for doctorate-level scientists seeking specialization in Forensic Toxicology

The program involves a combination of learning:

- Forensic toxicology analytical operations
- Method validations
- Publications/presentations
- Interpretation skills
- Court testimony training

Crime Laboratory Fellowship Programs

Forensic Genetics:

A 2-year program designed to train life science doctorates in casework and validation methods

Fellows focus on furthering specialized testing in Forensic Genetics, including animal and insect DNA testing



